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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Joseph First name M. Middle name Heister Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have		
	used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6080	

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Case number (if known)

Debtor 1 Joseph M. Heister

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)				
	Include trade names and doing business as names	Business name(s)					
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		5606 Shagbark Ct. Mason, OH 45040					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Warren County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Case number (if known)

Debtor 1	Joseph M. Heister	

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapt	er 7						
		☐ Chapt	er 11						
		☐ Chapt	er 12						
		■ Chapt	er 13						
8.	How you will pay the fee	abo ord	out how yo	ou may pay. Typically attorney is submittin	y, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
						on, sign and attach the Application for Individuals to Pay			
		☐ I re	quest th		(You may request this option	n only if you are filing for Chapter 7. By law, a judge may,			
		app	olies to yo	ur family size and yo	u are unable to pay the fee ir	our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
		ше	Арріісац	on to Have the Chap	er / Filling Fee Walved (Office	dai romi 1036) and me it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
	last o years:	□ 165.	District		When	Case number			
			District	-	When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	ine 12.					
	residence :	☐ Yes.	Has y	our landlord obtained	l an eviction judgment agains	st you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> Sthis bankruptcy peti		Judgment Against You (Form 101A) and file it as part of			

Page 4 of 60 Case number (if known) Debtor 1 Joseph M. Heister

Part	Report About Any Bu	sinesses	You Owr	n as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	No.	Iamı	not filing under Chap	oter 11.
		□ No.	I am I Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am i	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	4: Report if You Own or	Have Anv	Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any				· ·
	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code
					Number, Street, City, State & Zip Code

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Debtor 1 Joseph M. Heister

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 60 Case number (if known) Debtor 1 Joseph M. Heister Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph M. Heister Signature of Debtor 2 Joseph M. Heister Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on February 8, 2019

MM / DD / YYYY

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Debtor 1 Joseph M. Heister Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Harold Jarnicki	Date	February 8, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
Harold Jarnicki #0027595		
Printed name		
Harold Jarnicki and Associates		
Firm name		
576 Mound Court, Suite B		
Lebanon, OH 45036		
Number, Street, City, State & ZIP Code		
Contact phone (513) 932-5792	Email address	
#0027595 OH		
Bar number & State		

		Docume	ent Page 8 of 60)	
Fill in this infor	mation to identify your	case:			
Debtor 1	Joseph M. Heiste	er			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	273,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,121.42
	1c. Copy line 63, Total of all property on Schedule A/B	\$	282,121.42
Pa	t 2: Summarize Your Liabilities		
			i abilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	306,245.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	43,575.8
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	227,305.09
	Your total liabilities	\$	577,125.96
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,738.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,438.0
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Page 9 of 60 Case number (if known) Debtor 1 Joseph M. Heister

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

16,153.62

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	43,575.87
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	43,575.87

	in this inform	nation to identify	your case and th	is filing	j:						
Deb	tor 1	Joseph M. H		Name		Last Name					
	tor 2 use, if filing)	First Name		Name		Last Name					
Unit	ed States Bar	nkruptcy Court for	the: SOUTHER	N DIST	RICT OF OH	IIO					
Cas	e number _					_					Check if this is an amended filing
_		rm 106A/B e A/B: Pr	_								12/15
hink nfori Answ	it fits best. Be mation. If more er every quest	e as complete and a e space is needed, a tion.	accurate as possibl attach a separate sh	e. If two neet to ti	married peop nis form. On t	an asset fits in more the le are filing together, be top of any additionations or Have an Interest	oth are e	qually resp	onsible for su	pplyi	ng correct
1.1	5606 Shag	l bark Ct. f available, or other des	cription	What	Single-family						or exemptions. Put ms on <i>Schedule D:</i>
	,				Condominiu	ulti-unit building m or cooperative d or mobile home		Creditors	Who Have Clair	ns Se	cured by Property.
	Mason	ОН	45040-0000		Land			entire pro			rrent value of the rtion you own?
	City	State	ZIP Code		Other	st in the property? Chec	k one	Describe	ee simple, ten te), if known.		\$273,000.00 wnership interest by the entireties, or
	Warren				Debtor 2 onl	•	-				
	County				At least one rinformation	d Debtor 2 only of the debtors and anothe you wish to add about to tion number:		(see in	k if this is com structions) ocal	nmuni	ity property

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

Official Form 106A/B Schedule A/B: Property page 1

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Debt	Document Page 11 of 60 Case number (if k	nown)
	Vatercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories xamples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
	l No	
	l Yes	
	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	_{=>} \$0.00
•		
	Describe Your Personal and Household Items	
	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	lousehold goods and furnishings E <i>xampl</i> es: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	Yes. Describe	
	Washer, Dryer, Kitchen Table, Kitchen Chairs, Microwave, Cooking	
	Utensils, Eating Utensils, Cookware, Stove, Refrigerator, Living	
	Room Furnishings, Dining Room Furnishings, Beds, Nightstands, Dressers, Lamps, Desk, Lawnmower, Yard Equipment	\$3,000.00
	Diesseis, Lamps, Desk, Lawinnower, Taru Equipment	
E	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; m including cell phones, cameras, media players, games ☐ No ■ Yes. Describe	usic collections; electronic devices
	- Tos. Doscribe	
	TVs, VCR, DVD Player, Computer, Printer, Cell Phone	\$1,000.00
	collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp other collections, memorabilia, collectibles	, coin, or baseball card collections;
_	■ No □ Yes. Describe	
9. E c	equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca musical instruments	noes and kayaks; carpentry tools;
	No	
	Yes. Describe	
	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No Yes. Describe	
11. C	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No	
	Yes. Describe	
	Yes. Describe Personal Clothing	\$200.00
_	Personal Clothing	\$200.00
12. J	Personal Clothing Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge	
12. J	Personal Clothing Jewelry	

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Case 3:19-bk-30370 Document Page 12 of 60 Case number (if known) Debtor 1 Joseph M. Heister \$50.00 Wedding Band 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,250.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$20.00 Chase 17.1. Checking **Universal One Credit Union** \$40.12 Checking 17.2. Chase Savings \$10.05 17.3. **Universal One Credit Union** \$5.00 Savings 17.4. \$154.89 Chase Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

■ Yes.....

Institution or issuer name:

Fidelity Investment Account \$152.69

Acorns Investment Account \$100.54

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 Joseph M. Heister 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ■ Yes..... Ohio 529 College Advantage Plan \$1.415.61 (For 15 Year Old Child. No Deposits since 2017) Ohio 529 College Advantage Plan \$1,179.01 (For 14 Year Old Child. No Deposits since 2017) Ohio 529 College Advantage Plan \$327.76 (For 5 Year Old Child. No Deposits since 2017) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

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<u> </u>			Case Hullibel (# khowii)	
28. Tax refunds owed to you ☐ No				
Yes. Give specific information about	t them, includ	ding whether you already	filed the returns and the tax years	
2018 Federal, State and Local Tax Refunds Unknow				
	2018 F	ederal, State and Lo	cal Tax Refunds	Unknown
29. Family support Examples: Past due or lump sum alir No Yes. Give specific information	mony, spousa	al support, child support,	maintenance, divorce settlement, property s	ettlement
30. Other amounts someone owes you Examples: Unpaid wages, disability in benefits; unpaid loans you No □ Yes. Give specific information.	nsurance pay		s, sick pay, vacation pay, workers' compens	sation, Social Security
31. Interests in insurance policies Examples: Health, disability, or life in □ No	surance; hea	llth savings account (HS	A); credit, homeowner's, or renter's insuranc	ee
Yes. Name the insurance company Compar	of each polic ny name:	ey and list its value.	Beneficiary:	Surrender or refund value:
	y Life Insur ental Only)		Wife is Beneficiary	\$0.00
Transa	ımerica Life	e Insurance	Wife is Beneficiary	\$1,465.75
 32. Any interest in property that is due If you are the beneficiary of a living tr someone has died. ■ No □ Yes. Give specific information 33. Claims against third parties, wheth Examples: Accidents, employment dien No □ Yes. Describe each claim 	ust, expect p	roceeds from a life insur		ve property because
■ No Yes. Describe each claim	ciaims of ev	ery nature, including c	ounterclaims of the debtor and rights to s	set off claims
35. Any financial assets you did not all	roady list			
■ No □ Yes. Give specific information	ready not			
36. Add the dollar value of all of your for Part 4. Write that number here				\$4,871.42
Part 5: Describe Any Business-Related Pro	operty You Ow	vn or Have an Interest In. L	ist any real estate in Part 1.	
37. Do you own or have any legal or equitab	le interest in a	any business-related prop	erty?	
No. Go to Part 6.				
☐ Yes. Go to line 38.				

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Debtor 1 Joseph M. Heister

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$273,000.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$4,250.00 Part 4: Total financial assets, line 36 \$4,871.42 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

\$9,121.42

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

\$282,121.42

\$9,121.42

Official Form 106A/B Schedule A/B: Property page 6

		Docume	ent Page 16 of 60)	
Fill in this infor	mation to identify your	case:			
Debtor 1	Joseph M. Heiste	r			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					Check if this is an amended filing
Official Fo	orm 106C				

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the	Property	You	Claim as	Exemp	νt

1.	Which set of exemptions are you claiming	? Check one only, ever	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	5606 Shagbark Ct. Mason, OH 45040 Warren County	\$273,000.00		\$136,925.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)
	Washer, Dryer, Kitchen Table, Kitchen Chairs, Microwave, Cooking	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	Utensils, Eating Utensils, Cookware, Stove, Refrigerator, Living Room Furnishings, Dining Room Furnishings, Beds, Nightstands, Dressers, Lamps, Desk, Lawnmower, Yard Equipment Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)
	TVs, VCR, DVD Player, Computer, Printer, Cell Phone	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2020.00(//)(-/)(u)
	Personal Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	LINE HOITI SCHEUUIE AVD. 1111			100% of fair market value, up to	2023.00(Λ)(Τ)(α)

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Case number (if known)

			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Wedding Band Line from Schedule A/B: 12.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
			100% of fair market value, up to any applicable statutory limit	(), /, /
Ohio 529 College Advantage Plan For 15 Year Old Child. No Deposits	\$1,415.61		\$1,415.61	Ohio Rev. Code Ann. § 2329.66(A)(10)(e)
since 2017) Line from Schedule A/B: 24.1			100% of fair market value, up to any applicable statutory limit	(), (), (
Ohio 529 College Advantage Plan For 14 Year Old Child. No Deposits	\$1,179.01		\$1,179.01	Ohio Rev. Code Ann. § 2329.66(A)(10)(e)
since 2017) ine from Schedule A/B: 24.2			100% of fair market value, up to any applicable statutory limit	
Ohio 529 College Advantage Plan For 5 Year Old Child. No Deposits	\$327.76		\$327.76	Ohio Rev. Code Ann. § 2329.66(A)(10)(e)
since 2017) ine from Schedule A/B: 24.3			100% of fair market value, up to any applicable statutory limit	The second secon
Fidelity Life Insurance (Accidental Only)	\$0.00	•	100%	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10,
Beneficiary: Wife is Beneficiary ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	3911.12, 3911.14
Fransamerica Life Insurance Beneficiary: Wife is Beneficiary	\$1,465.75		\$1,465.75	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10,
ine from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	3911.12, 3911.14
Cash and Deposits Line from Schedule A/B:	\$0.00		\$475.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	· // /
Any Other Property Line from Schedule A/B:	\$0.00		\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	• • •

		Document	Page 18	of 60		
Fill in this inform	nation to identify yοι	ır case:				
Dobtor 1	Jaconk M. Haia	to				
Debtor 1	Joseph M. Heis	Middle Name	Last Name			
Debtor 2	i not rame	Middle Hame	Last Hame			
(Spouse if, filing)	First Name	Middle Name	Last Name			
, , ,						
United States Ba	nkruptcy Court for the	: SOUTHERN DISTRICT OF OHI	10		-	
0						
Case number _					□ Chaole	if this is an
(II KIIOWII)						if this is an
					amend	led filing
Official Earn	106D					
Official Forn						
Schedule	D: Creditors	s Who Have Claims S	Secured	l by Propert	У	12/15
		If two married people are filing togethe out, number the entries, and attach it to				
number (if known).	, riaditional rago, mile	out, number the entries, and attach it is	oo .o o	tillo top of any additio	nai pagoo, milo your na	no una cacc
1. Do any creditors	have claims secured by	v vour property?				
`			ooboduloo Vo	u hava nathina alaa t	o roport on this form	
_		his form to the court with your other s	scriedules. 10	iu nave notning eise t	o report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List A	II Secured Claims					
				Column A	Column B	Column C
		more than one secured claim, list the crec s a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's name		Do not deduct the	that supports this	portion
				value of collateral.	claim	If any
2.1 Private Na		B		\$256,544.00	\$273,000.00	\$0.00
Mortgage		Describe the property that secures the		φ230,344.00	Ψ213,000.00	φυ.υυ
Creditor's Name	е	5606 Shagbark Ct. Mason, O	H 45040			
		Warren County				
		As of the date you file, the claim is: 0	Check all that			
P.O. Box		apply.	on ook all that			
Los Ange	les, CA 90051	☐ Contingent				
Number, Street	, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or secu	ured		
Debtor 2 only		car loan)				
Debtor 1 and De	ehtor 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
_	he debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cl		_ ~	Mortgage			
community de		Other (including a right to offset)	mortgage			
•						
Date debt was inc	urred 2015	Last 4 digits of account numb	er 0496			
Universal	One Credit					
Union		Describe the property that secures the	he claim:	\$49,701.00	\$273,000.00	\$33,245.00
Creditor's Name	e	5606 Shagbark Ct. Mason, O	H 45040			
		Warren County				
		-				
P.O. Box	467	As of the date you file, the claim is: C apply.	Check all that			
Dayton, O	H 45409	Contingent				
Number, Street	, City, State & Zip Code	☐ Unliquidated				
,		☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
_		☐ An agreement you made (such as m	nortdade or sec	ıred		
Debtor 1 only		car loan)	iorigage or sect	uiou		
Debtor 2 only						
Debtor 1 and De	•	☐ Statutory lien (such as tax lien, med	nanic's lien)			
	he debtors and another	Judgment lien from a lawsuit		4		
☐ Check if this cl	aim relates to a	Other (including a right to offset)	Second Mo	rtgage		

community debt

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Debtor 1	Joseph M.	Heister		Case number (if known)	
	First Name	Middle Name	Last Name		
Date debt	was incurred	2017	Last 4 digits of account number		
Add the	dollar value of	your entries in Column	A on this page. Write that number her	e: \$306,245.0	0
	the last page of	•	llar value totals from all pages.	\$306,245.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page	20 of 6	30	_	
Fill in th	is information to identify y	our case:						
Debtor 1	Joseph M. He	ister						
20210	First Name		lle Name	Last Nar	ne			
Debtor 2								
(Spouse if,	filing) First Name	Mido	lle Name	Last Nar	ne			
United S	tates Bankruptcy Court for th	e: SOUTHI	ERN DISTRICT OF C	OHIO				
Case nu	mber							
(if known)							☐ Check	if this is an
							amend	ded filing
Officia	L Form 106F/F							
	<u>Il Form 106E/F</u>	\//b = 11e	va Unaaauvaa	d Claim				40/4E
	dule E/F: Creditors						NDDIODITY I	12/15
	nplete and accurate as possible story contracts or unexpired learning to the contracts or unexpired learning to the contracts or unexpired learning to the contracts of the contract of the contracts of the contract of the contracts of the contract of the contr							
	G: Executory Contracts and U							
	D: Creditors Who Have Claims							
	h the Continuation Page to this case number (if known).	s page. If you ha	ve no information to re	eport in a P	art, do not f	ile that Part. On the	top of any additional	pages, write your
Part 1:	List All of Your PRIORITY	/ Unsecured (laime					
	ny creditors have priority unse							
_	o. Go to Part 2.	ourou olumbo ug	amor you.					
■ Y								
		laima If a gradite	or has more than one pr	iority upoco	urad alaim liv	at the graditar congret	aly for each alaim. For	soob alaim listed
	all of your priority unsecured c fy what type of claim it is. If a clai							
possi	ble, list the claims in alphabetical	l order according	to the creditor's name.	If you have i				
Part '	If more than one creditor holds	a particular clair	n, list the other creditors	s in Part 3.				
(For a	an explanation of each type of cla	aim, see the instr	uctions for this form in th	he instructio	n booklet.)	Total claim	Priority	Nonpriority
						Total olallii	amount	amount
	Internal Revenue Servic	e	Last 4 digits of acco	unt numbe	r	\$43,575.87	\$43,575.87	\$0.00
	Priority Creditor's Name P.O. Box 7346		When was the debt i	incurred?	2015			
	Philadelphia, PA 19101		When was the debt i	incurreu r	2013		_	
	Number Street City State Zip Coo	de	As of the date you fil	le, the clain	n is: Check a	all that apply		
Wh	o incurred the debt? Check one).	☐ Contingent					
	Debtor 1 only		☐ Unliquidated					
	Debtor 2 only		☐ Disputed					
_	Debtor 1 and Debtor 2 only		Type of PRIORITY un	nsecured c	laim:			
_	ŕ		☐ Domestic support					
_	At least one of the debtors and a		<u> </u>					
	Check if this claim is for a con	nmunity debt	■ Taxes and certain□ Claims for death o		=	=		
_	ne claim subject to offset?			r personai ir	ijury wniie yo	ou were intoxicated		
			Other. Specify	odorol In	come Tax			-
ш	Yes			ederai ii	come raz	X 		
Part 2:	List All of Your NONPRIC	ORITY Unsecu	red Claims					
3. Do a	— ny creditors have nonpriority u	nsecured claim	s against you?					
_	o. You have nothing to report in t			h your other	schedules.			
■ Y	es.							
		ad alaima in 41	alphabatical ander of	the eredit -	uuba bald-	anah alaim If a a	itar haa mara than	nonnriorit.
unse	all of your nonpriority unsecure cured claim, list the creditor sepa one creditor holds a particular cla	rately for each cl	aim. For each claim liste	ed, identify w	what type of c	laim it is. Do not list o	laims already included	I in Part 1. If more
Port 1		um, not the other	oreunois in Fait 3.11 you	a nave more	man unee n	oriphority unsecured	ciaiiiis iiii out tiie Conti	nualion raye of

Total claim

Page 21 of 60 Case number (if known) Document Debtor 1 Joseph M. Heister Air Authority Heating & Air 9157 \$275.00 4.1 Conditioning Last 4 digits of account number Nonpriority Creditor's Name 654 Reading Road When was the debt incurred? 2018 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Account Other. Specify 4.2 **American Express** 7609 \$1,374.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 981537 When was the debt incurred? 2016 El Paso, TX 79998 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **American Express** 1004 \$1,671.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 650448 When was the debt incurred? 2017 Dallas, TX 75265-0448 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed

Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Case number (if known) Debtor 1 Joseph M. Heister 4.4 \$2,494.00 American Express Last 4 digits of account number 1007 Nonpriority Creditor's Name P.O. Box 650448 When was the debt incurred? 2018 Dallas, TX 75265-0448 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.5 **Aptive Environmental** Last 4 digits of account number 8081 \$324.23 Nonpriority Creditor's Name 4710 Interstate Drive When was the debt incurred? 2018 Cincinnati, OH 45246 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Account** Other. Specify 4.6 Last 4 digits of account number 0155 \$18,578.00 Avant Nonpriority Creditor's Name 222 N. Lasalle Street When was the debt incurred? 2015 Ste 1700 Chicago, IL 60601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Loan

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Salt Lake City, UT 84130-0281 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

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Debtor 1 Joseph M. Heister 4.1 Capital One Bank USA 3451 \$7,944.00 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 2014 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.1 Controlled Credit Corp. 1884 \$1,575.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5154 When was the debt incurred? 2017 Cincinnati, OH 45205-0154 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill ☐ Yes 4.1 **Discover Financial Services** 4078 \$1.591.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 15316 When was the debt incurred? 2016 Wilmington, DE 19850-5316 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Document Page 25 of 60 Debtor 1 Joseph M. Heister ase number (if known) 4.1 **Inland Residential Real Estate** 3318 \$2,526.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2901 Butterfield Road When was the debt incurred? 2017 Oak Brook, IL 60523 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Account 4.1 **Lending Club** 5920 \$15,000.00 Last 4 digits of account number Nonpriority Creditor's Name 71 Stevenson St. When was the debt incurred? 2015 Suite 300 San Francisco, CA 94105 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.1 **Mariner Finance** 0032 \$2,543.00 Last 4 digits of account number Nonpriority Creditor's Name 8211 Towne Center Dr. When was the debt incurred? 2016 Nottingham, MD 21236 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No ☐ Yes ☐ Student loans

report as priority claims

Other. Specify Loan

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debto	Joseph M. Heister		Case number (if known)	
4.1	Shane Ensor	Last 4 digits of account number	9GLR	\$90,000.00
6	Nonpriority Creditor's Name c/o Don Walsh, Esq/ Greg Currey,	When was the debt incurred?	2018	400,000.00
	Esq. 7 St. Paul Street, 18th Floor Baltimore, MD 21202 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Suit		
4.1	Toyota Motor Credit Corp.	Last 4 digits of account number	2197	\$47,932.00
<u>, </u>	Nonpriority Creditor's Name 5005 N. River Blvd. NE	When was the debt incurred?	2018	·
	Cedar Rapids, IA 52411-6634 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Unique Law Care	Last 4 digits of account number	8618	\$155.86
<u> </u>	Nonpriority Creditor's Name P.O. Box 62897	When was the debt incurred?	2018	
	Cincinnati, OH 45262 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Lawn Care		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Joseph M. Heister		Case number (if known)	_
Name and Address Accounts Receivable Management 910 West Van Buren Street Suite 100-245 Chicago, IL 60607	On which entry in Part 1 or Part Line 4.13 of (<i>Check one</i>):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Anthony Huspaska, Esq. Stenger Law 2618 East Paris Grand Rapids, MI 49546	On which entry in Part 1 or Part Line 4.6 of (<i>Check one</i>):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
• •	Last 4 digits of account number		
Name and Address CACH, LLC 55 Beattie Place, Suite 110 Greenville, SC 29601	On which entry in Part 1 or Part Line 4.7 of (Check one):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
ŕ	Last 4 digits of account number		
Name and Address CACH, LLC c/o Stenger & Stenger Co. 2618 East Paris Ave. SE Grand Rapids, MI 49546	On which entry in Part 1 or Part Line 4.7 of (<i>Check one</i>):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Crana Rapids, iiii 43040	Last 4 digits of account number		
Name and Address First Source Advantage 205 Bryant Woods South Buffalo, NY 14228	On which entry in Part 1 or Part Line 4.2 of (<i>Check one</i>): Last 4 digits of account number	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	· · · · · · · · · · · · · · · · · · ·		_
Name and Address GC Services P.O. Box 46960 Saint Louis, MO 63146	Line 4.4 of (Check one):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Nationwide Credit Inc. P.O. Box 14581 Des Moines, IA 50306-3581	On which entry in Part 1 or Part Line 4.2 of (<i>Check one</i>):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 43,575.87
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 43,575.87
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 227,305.09

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Debtor 1 Joseph M. Heister

Total Nonpriority. Add lines 6f through 6i.

6j. \$ 227,305.09

		I A MAININ.	111 1 11111. 7 . 7 (7) (7)	
Fill in this info	rmation to identify your	case:		
Debtor 1	Joseph M. Heiste	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

		Docume	ent Pade 30 d)T (b()	
Fill in this in	nformation to identify your				
Debtor 1	Joseph M. Heiste	r			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	s Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case numbe	er				☐ Check if this is an amended filing
	Form 106H Ile H: Your Cod	ebtors			12/15
people are fi fill it out, and your name a	ling together, both are equal number the entries in the nd case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct informat n the Additional Page t	ion. If more space is ned this page. On the top	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
1. Do yo	ou have any codebtors? (If y	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona, No. G	n the last 8 years, have you California, Idaho, Louisiana, So to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
in line 2 Form 10 out Col	e again as a codebtor only it D6D), Schedule E/F (Official	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 16G). Use Schedule D, S Column 2: The cred	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
Nu	me, rumber, etreet, etty, etate and 21	. 0000		Check all schedules	шагарріу.
3.1 Na	ame			☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line	·
Nı	umber Street			— Concadic C, iiile	
Cit		State	ZIP Code		
3.2 Na	ame			☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line☐	
Nu Cit	umber Street ty	State	ZIP Code	_	

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Fill in this informa	tion to identify your case:	
Debtor 1	Joseph M. Heister	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Regional Manager	Financial Analyst
Include part-time, seasonal, or self-employed work.		Primary Residential Mortgage	
	Employer's name	Group	Enable Injections Inc.
Occupation may include student or homemaker, if it applies.	Employer's address	1265 Corona Pt. Ste 301 Corona, CA 92879	2863 E. Sharon Road Cincinnati, OH 45241
	How long employed the	here? 1 Year	3 Years

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or non-filing spouse

- List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

ebtor 2 or iling spouse		For Debtor 1		
7,848.00	\$	7,500.00	\$	2.
0.00	+\$	0.00	+\$	3.
7,848.00	\$_	7,500.00	\$	4.

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Joseph M. Heister	-	Case	number (if kno	wn)			
				For	Debtor 1		For Debtor		
	Cop	y line 4 here	4.	\$	7,500.	00	\$ 7	,848.00	-
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	600. 0. 118. 0.	00 00 00	\$ \$ \$ \$ \$ \$	0.00 314.00 0.00 663.00 0.00 0.00 0.00	- - - - -
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	2,593.			,017.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 	4,907.		· 	,831.00	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$ \$ \$ \$ \$ \$	0. 0. 0. 0.	00 00 00 00 00 00 00 00 00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	- - - -
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.	00	\$	0.00	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,907.00	\$_	4,831.00	= \$ _	9,738.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depen		•		ed in <i>Schedul</i>	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						\$Combin	9,738.00
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						nea y income

Schedule I: Your Income

page 2

Official Form 106I

Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	Joseph M. H	eister			Ch	eck if th	nis is: mended filing		
	otor 2 ouse, if filing)						A sup	oplement shov	ving postpetition chapte the following date:	r
Unit	ted States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			MM /	DD / YYYY		
1	se number nown)									
0	fficial Fo	rm 106J				l				
S	chedule	J: Your	Exper	ises					12	2/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.						
Par 1.	t 1: Descr	ibe Your House	hold							_
	■ No. Go to	line 2. s Debtor 2 live i	in a sonar	ata housahold?						
	□ N	0	·	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			ependent's ge	Does dependent live with you?	
	Do not state dependents				Daughter		5		□ No ■ Yes	
	•				Com			4	□ No	
					Son		_ =	4	■ Yes □ No	
					Daughter		_ 1	6	Yes	
									□ No □ Yes	
3.	expenses of	penses include f people other t d your depende	han 👝	No Yes						
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> Y				Your expe	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$		1,940.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat		ipkeep expenses		4c. 4d.			100.00 27.00	
5.				our residence, such as ho	me equity loans	4a. 5.			494.00	

Deb	otor 1	Joseph M. Heister	Case num	ber (if known)	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	375.00
	6b.	Water, sewer, garbage collection	6b.	\$	95.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	415.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	l and housekeeping supplies	7.	\$	1,100.00
8.	Child	dcare and children's education costs	8.	\$	1,300.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	120.00
10.	Pers	onal care products and services	10.	\$	150.00
11.	Medi	cal and dental expenses	11.	\$	400.00
12.	Tran	sportation. Include gas, maintenance, bus or train fare.			450.00
		ot include car payments.	12.	·	450.00
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	· -	95.00
		itable contributions and religious donations	14.	\$	0.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	\$	72.00
		Health insurance	15a. 15b.		0.00
		Vehicle insurance	15b.		139.00
		Other insurance. Specify:	15d.		0.00
16		s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Spec	ify: IRS Repayment Plan (for Priority Taxes)	16.	\$	585.00
17.		Illment or lease payments: Car payments for Vehicle 1	17a.	¢	0.00
		Car payments for Vehicle 2	17a. 17b.	· -	
			17b. 17c.	·	0.00
		Other. Specify: Wife's Odyssey Lease (expires Sept 2021) Wife's March (page off Sept 2022)	17c. 17d.	·	505.00
	17u.	Other. Specify: Wife's Mazda (pays off Sept 2022)	17u.	\$ 	336.00
40	V	Wife's Unsecured Debt Payments (furnace, med bill, discover)		Ф	740.00
18.		payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.		r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.		0.00
20.		r real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Income.	
		Mortgages on other property	20a.		0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22.		ulate your monthly expenses			0.400.00
		Add lines 4 through 21.		\$	9,438.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		Add line 22a and 22b. The result is your monthly expenses.		\$	9,438.00
23.		ulate your monthly net income.		•	
		Copy line 12 (your combined monthly income) from Schedule I.	23a.		9,738.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	9,438.00
	23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	300.00
		The result is your <i>monthly net income</i> .	200.		

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor's wife and children have mitochondrial disease, and require 3 bottles of liquid CoEnzyme Q10 per month at \$126/bottle each, along with other out-of-pocket medications. Thus, their monthly medical expenses are higher than normal.

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Fill in this infor	mation to identify your	case:			
Debtor 1	Joseph M. Heiste				
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
if known)					☐ Check if this is an amended filing
Official Forr					
Jeclarat	tion About a	an Individual	Debtor's Sc	hedules	12/15
Sig	n Below				
Did you pa	ay or agree to pay some	eone who is NOT an attori	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. I	Name of person				v Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	ı
X /s/ Jos	seph M. Heister		x		
Josep	h M. Heister ire of Debtor 1		Signature of	Debtor 2	
Date	February 8, 2019		Date		

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		ation to identify you				
Deb	tor 1	Joseph M. Heist	er Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	SOUTHERN DISTRICT O	OF OHIO		
Cas	e number					
(if kno	own)				-	Check if this is an imended filing
	ficial For		Affaina fan Indini	duala Filimo fan D		
			Affairs for Individ			4/16
infor	mation. If me		attach a separate sheet to		equally responsible for sup additional pages, write you	
Part	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	■ Married □ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	'.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor	
state	s and territorie	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and V	visconsin.)
	■ No □ Yes, Mal	ke sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H)		
_		•	·			
Part	Explair	the Sources of You	r Income			
	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,500.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Joseph M. Heister

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2018)	■ Wages, commissions, bonuses, tips	\$63,054.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$113,750.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	winnings.	f you are fil	ing a joint cas	pensions; rental income; interse and you have income that younge from each source separate	ou received together, list it o	·	d gambling and lottery
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	art 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	□ No.	Neither Dindividual During the No. Yes	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr not include to adjustmen or Debtor 2 c	personal, family, or household per you filed for bankruptcy, discontinuous filed for bankruptcy, discontinuous filed for bankruptcy, discontinuous filed for the discontinuous filed for the formation of the formation of the formation of the filed formation of the filed formation of the filed formation of the filed filed filed filed filed formation of the filed file	Imer debts. Consumer debts depurpose." d you pay any creditor a total depurpose at the for domestic support oblights bankruptcy case. It is after that for cases filed on the first debts.	n one or more payments and t ations, such as child support a or after the date of adjustment	he total amount you and alimony. Also, do
		_	•	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$600 or more?	
		No.	Go to line 7				
		☐ Yes	List below 6	each creditor to whom you pai	d a total of \$600 or more and	the total amount you paid tha	t creditor. Do not

attorney for this bankruptcy case.

Dates of payment

Amount you

still owe

Was this payment for ...

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

paid

Total amount

Best Case Bankruptcy

Official Form 107

Creditor's Name and Address

Joseph M. Heister Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Ensor v. Sagamore Home Suit for Wages United States District Court** Pending Mortgage LLC et al. for the District of Maryland ☐ On appeal Case No. 18-CV-1389-GLP 6550 Cherrywood Lane □ Concluded Greenbelt, MD 20770 CACH, LLC v. Heister Suit on Account Warren County Common Pending Case No. 18CV91360 **Pleas Court** ☐ On appeal 500 Justice Drive □ Concluded Lebanon, OH 45036 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. □ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the property Explain what happened 2014 Lexus LS 460 Toyota Motor Credit Corp. November \$0.00 5005 N. River Blvd. NE 2018 Cedar Rapids, IA 52411-6634 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied.

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ase number (if known)

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Debtor 1 Joseph M. Heister

17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you lis	or to make payments			or transfer any proper	ty to anyone who	
	No Yes. Fill in the details.						
	Person Who Was Paid	Description and w	alua af amu muam	o who	Data navment	Amount of	
	Address	Description and vertransferred	alue or any prop	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you	Description and voproperty transferr			any property or s received or debts xchange	Date transfer was made	
		Old Computer M Laptops	lonitors and		Craigslist for mately \$350.	2018	
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protec ■ No □ Yes. Fill in the details. Name of trust					of which you are a Date Transfer was	
				-		made	
Par	rt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associated. No	ther financial accour	nts; certificates o	of deposit; s		,	
	Yes. Fill in the details.						
		est 4 digits of ecount number	Type of accour instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, any	y safe depos	it box or other deposi	tory for securities,	
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	lace other than your	home within 1 y	ear before y	ou filed for bankruptc	y?	
	No Silving and A silving						
	Yes. Fill in the details.	M/I I - 1		D		D (111	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?	

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Case number (if known) Document

Debtor 1 Joseph M. Heister

Address (Number, Street, City, State and ZIP Code) Code) Part 102 Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or uto own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Co	For someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or othe regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether y to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazard hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre value in the details. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental unit Address (Number, Street, City, State and ZIP Code)								
Yes. Fill in the details. Owner's Name Where is the property? (Number, Street, City, State and ZIP Code) Number, Street, City, State and ZIP Code) Number, Street, City, State and ZIP Describe the property Victorian No	Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or othe regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether y to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardhazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre that any governmental unit notified you that you may be liable or potentially liable under or in virial No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code)	ed from, are storing for, or hold in trust							
Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, State and ZIP Code) Owner Name Address (Number, Street, City, Sta	Owner's Name Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or othe regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether y to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazard hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre 10 No 10 Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code)								
Address (Number, Street, City, State and ZIP Code) Civitors Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Stire means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether y to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazard hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre 10 No 10 Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code)								
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Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or uto own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Nature of the case Status of the case Status and ZIP Code)	 ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other regulations controlling the cleanup of these substances, wastes, or material. ■ Site means any location, facility, or property as defined under any environmental law, whether y to own, operate, or utilize it, including disposal sites. ■ Hazardous material means anything an environmental law defines as a hazardous waste, hazardhazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre any definition of the proceedings that you may be liable or potentially liable under or in views. ■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) 								
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Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No	 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurre Has any governmental unit notified you that you may be liable or potentially liable under or in violation. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and know it ZIP Code) 	ou now own, operate, or utilize it or used							
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code)	24. Has any governmental unit notified you that you may be liable or potentially liable under or in vi No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental unit Address (Number, Street, City, State and ZIP Code)	dous substance, toxic substance,							
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Environmental law, if you know it Environmental law, if you know it Environmental law, if you know it Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, Street, City, State and ZIP Code) Name Address (Number, Street, City, Street, City, State and ZIP Code)	■ No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environm know it ZIP Code)	d.							
☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it Date of notic know it 25. Have you notified any governmental unit of any release of hazardous material? No □ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ■ No ☐ Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case	☐ Yes. Fill in the details. Name of site Governmental unit Environm Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) know it	olation of an environmental law?							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)								
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice Rough in Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code)	25. Have you notified any governmental unit of any release of hazardous material?	nental law, if you Date of notice							
☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ■ No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case		Have you notified any governmental unit of any release of hazardous material?							
Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Cas	_ '''								
■ No □ Yes. Fill in the details. Case Title Case Number Case Number Case Number Status of the Case Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it	nental law, if you Date of notice							
☐ Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number, Street, City, State and ZIP Code) Case Number Case Number Case Number, Street, City, State and ZIP Code)	26. Have you been a party in any judicial or administrative proceeding under any environmental law	? Include settlements and orders.							
☐ Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Case Number Case Number Case Number, Street, City, State and ZIP Code) Case Number Case Number Case Number, Street, City, State and ZIP Code)	■ No								
Case Number Name Address (Number, Street, City, State and ZIP Code) Case	· · ·								
Part 11: Give Details About Your Business or Connections to Any Business	Case Number Name Address (Number, Street, City,								
	Part 11: Give Details About Your Business or Connections to Any Business								
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?		ving connections to any business?							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time	_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	,							
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
☐ A partner in a partnership									
☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Entered 02/08/19 16:06:47 Desc Main Case 3:19-bk-30370 Filed 02/08/19 Document Page 42 of 60 Case number (if known) Debtor 1 Joseph M. Heister ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: Best Mortgage Platforms LLC Set up to do consulting work. Part Time. No assets. No From-To 2011 - 2015 accounts receivable. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph M. Heister Signature of Debtor 2 Joseph M. Heister Signature of Debtor 1 Date February 8, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Doc 1

☐ Yes. Name of Person ___

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LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re: Joseph M. Heister		Case No.
		Chapter 13
	Debtor(s)	Judge

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I.	<u>Disciosure</u>		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplation of follows:	in bankruptc	y, or agreed to be paid to me, for
F	or legal services, I have agreed to accept	\$	3,700.00
P	rior to the filing of this statement I have received	\$	1,190.00
В	alance Due	\$	2,510.00
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other p associates of my law firm.	ersons unless	they are members and/or
	☐ I have agreed to share the above-disclosed compensation with another person of my law firm. A copy of the agreement, together with a list of the names of attached.		

II. **Application**

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's a. financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form c. 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be
 - Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided, d. legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation

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will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding; preparation and filing of motions pursuant to 522(f)(2)(A) for avoidance of liens on household goods; preparation and filing of motions for redemption pursuant to 722

February 8, 2019	/s/ Harold Jarnicki	
Date	Harold Jarnicki #0027595	
	Name Harold Jarnicki and Associates	
	576 Mound Court, Suite B Lebanon, OH 45036	
	(513) 032-5702	

#0027595 OH

Fax: (513) 932-5443

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Fill in this inform	nation to identify your case	9:
Debtor 1	Joseph M. Heister	
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the:	Southern District of Ohio
Case number (if known)		

Check	as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 7,500.00 8,653.62 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 3:19-bk-30370 Doc 1 Filed 02/08/19 Entered 02/08/19 16:06:47 Desc Main Document Page 46 of 60 Joseph M. Heister Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 7,500.00 8,653.62 16,153.62 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 16.153.62 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 16,153.62 14. Your current monthly income. Subtract line 13 from line 12.

15b. The result is your current monthly income for the year for this part of the form.

15a. Copy line 14 here=>

15. Calculate your current monthly income for the year. Follow these steps:

Multiply line 15a by 12 (the number of months in a year).

16,153.62

193,843.44

x 12

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Debt	or 1	Joseph M. Heister		Case number (if known)	
16	. Cal	culate the median family income that applies to y	ou. Follow these ste	pps:	
	16a	a. Fill in the state in which you live.	ОН		
	16h	b. Fill in the number of people in your household.	5		
		:. Fill in the median family income for your state and	niza of household		¢ 95,721.00
	100	To find a list of applicable median income amounts instructions for this form. This list may also be available.	s, go online using the	link specified in the separate	\$
17	. Hov	w do the lines compare?	lable at the bankiup	cy clerk's diffice.	
	17a	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your Disp		
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	py your total average monthly income from line 1	1		\$16,153.62
19.	con	duct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.	married, your spous 1 U.S.C. § 1325(b)(4	e is not filing with you, and you) allows you to deduct part of your	
	19a	a. If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
	19b	Subtract line 19a from line 18.			\$16,153.62
20.	Cal	culate your current monthly income for the year.	Follow these steps:		
	20a	ı. Copy line 19b			\$16,153.62
		Multiply by 12 (the number of months in a year).			x 12
	20b	o. The result is your current monthly income for the y	ear for this part of the	e form	\$ 193,843.44
	20c	:. Copy the median family income for your state and	size of household fro	m line 16c	\$95,721.00
	21.	How do the lines compare?			
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the co	urt, on the top of page 1 of this form, check	s box 3, The commitment
		■ Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	lless otherwise order	ed by the court, on the top of page 1 of this	s form, check box 4, The
Par	t 4:	Sign Below			
	Ву	signing here, under penalty of perjury I declare that t	he information on th	s statement and in any attachments is true	and correct.
)	(/s	/ Joseph M. Heister			
	Jo	seph M. Heister			
		gnature of Debtor 1 e February 8, 2019			
	Date	MM / DD / YYYY			
	If yo	ou checked 17a, do NOT fill out or file Form 122C-2.			
	If yo	ou checked 17b, fill out Form 122C-2 and file it with	his form. On line 39	of that form, copy your current monthly inco	ome from line 14 above.

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Fill in	this infor	mation to id	lentify your cas	e:							
Debto	r 1 _	Joseph M.	Heister								
Debto	r 2 se, if filing))									
United	l States Ba	ankruptcy Co	urt for the: Sou	thern District of	Ohio						
Case i	number wn)							☐ Che	eck if this	is an amend	ed filing
Officia	l Form 12	2C-2									
Cha	pter 1	13 Calc	ulation o	f Your Di	isposak	ole Ind	come				04/10
Comm Be as o	itment Pe complete is needed	eriod (Officia and accurat I, attach a se	I need your com I Form 122C-1). The as possible. If the parate sheet to I name and case	two married pe	eople are fili	ng togeth	er, both are	equally res	ponsible	for being acc	urate. If more
Part 1	: Calo	culate Your	Deductions from	Your Income							
the	questions	s in lines 6-	rvice (IRS) issue I5. To find the IR available at the	S standards, g	jo online usi						
exp	enses if th	ney are highe	nts set out in line r than the standa tt any amounts th	rds. Do not inclu	ide any opera	ating expe	nses that you	subtracted	from incor		
If yo	our expens	ses differ fror	n month to month	, enter the avera	age expense.	<u>.</u>					
Not	e: Line nur	mbers 1-4 ar	e not used in this	form. These nur	mbers apply	to informa	tion required	by a similar	form used	in chapter 7 d	cases.
5.	The num	nber of peop	ole used in deter	mining your de	eductions fro	om incom	е				
	plus the	number of a	people who could ny additional depe in your househol	endents whom yo						5	
Nat	ional Star	ndards	You must use	e the IRS Nation	nal Standards	s to answe	r the question	ns in lines 6-	7.		
6.			other items: Usi dollar amount for				n line 5 and th	ne IRS Natio	onal	\$	2,051.00
7.	the dollar people w	r amount for who are 65 or	n care allowance out-of-pocket hea olderbecause o amount, you may	alth care. The nu older people have	umber of peop e a higher IR	ple is split S allowan	into two cate ce for health	goriespeop	ole who are	e under 65 and	b

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Page 49 of 60 Document Joseph M. Heister Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 5 7c. Subtotal. Multiply line 7a by line 7b. 260.00 Copy here=> \$ 260.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 0.00 7g. **Total.** Add line 7c and line 7f 260.00 260.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 702.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,518.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Private National Mortgage** 1,940.00 **Universal One Credit Union** 494.00 Copy Repeat this amount 2.434.00 9b. Total average monthly payment on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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tor 1	Joseph M. Heister		Case number (if kno	wn)		
11.	Local transportation expenses: Check the number of vehic	cles for which you claim a	an ownership or	operating	expense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	■ 2 or more. Go to line 12.					
2.	Vehicle operation expense: Using the IRS Local Standards					392.00
3.	operating expenses, fill in the <i>Operating Costs</i> that apply for Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.	Standards, calculate the	net ownership	or lease ex	rpense for each ve	hicle below
Vel	nicle 1 Describe Vehicle 1:					
3a.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
	Average monthly payment for all debts secured by Vehicle 1					
,	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		t			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
			٦		Donast this	
	Total Average Monthly Payment	\$	Copy here => -\$ _	0	Repeat this amount on line 33b.	
3c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0), enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2:					
3d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
3e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$0.00	Copy here => -\$	0.00	Repeat this amount on line 33c.	
3f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0), enter \$0	\$	0.00	Vehicle 2 expense here => \$	0.0
4.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				the \$	0.0
5.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in what claim more than the IRS Local Standard for Public Transport	what you believe is the ap				0.00

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Debtor 1 **Joseph M. Heister** Case number (if known)

		In addition to the expense de the following IRS categories		s listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soci	al security taxes, and Medic wever, if you expect to recei om the total monthly amount	are taxe: ive a tax	s. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	3,502.10
17.	Involuntary deductions: The contributions, union dues, a	, , ,	uctions th	nat your job re	quires, such as retirement		
	Do not include amounts that	are not required by your job	, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	ents that you make for your life insurance on your depe	spouse's	s term life insu	e insurance. If two married people are irance. I spouse's life insurance, or for any form	\$	127.42
19.	Court-ordered payments: administrative agency, such Do not include payments on	as spousal or child support	paymen	ts.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total month						
	as a condition for your jo				·		
	for your physically or me	ntally challenged dependent	child if r	no public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthl Do not include payments for				sitting, daycare, nursery, and preschool.	\$	1,300.00
22.	that is required for the health by a health savings account	n and welfare of you or your . Include only the amount the	depende at is mor	ents and that is e than the tota		•	140.00
	Payments for health insuran	· ·				\$	140.00
23.	for you and your dependent	s, such as pagers, call waitir necessary for your health and d by your employer.	ng, caller nd welfa	identification, re or that of yo	you pay for telecommunication services special long distance, or business cell our dependents or for the production of		
	expenses, such as those rep				rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	expenses, such as those rep Add all of the expenses al Add lines 6 through 23.	ported on line 5 of Official Fo	orm 1220	C-1, or any am		+ \$ \$	8,474.52
	Add all of the expenses al	ported on line 5 of Official Fo	orm 1220 nse alloveductions	C-1, or any am wances. s allowed by the	nount you previously deducted.		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	lowed under the IRS exper These are additional de Note: Do not include are	orm 1220 nse allow eductions ny experi	C-1, or any am wances. s allowed by the se allowances ccount expen	nount you previously deducted.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran	lowed under the IRS exper These are additional de Note: Do not include are	orm 1220 nse allow eductions ny experi	C-1, or any am wances. s allowed by the se allowances ccount expen	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents.	lowed under the IRS exper These are additional de Note: Do not include are	nse alloweductions avings a unts that	wances. s allowed by the see allowances ccount expent are reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance	lowed under the IRS expers These are additional de Note: Do not include are y insurance, and health sace, and health savings according to the sace.	orm 1220 nse allow eductions ny experi ivings a unts that	wances. s allowed by the see allowances ccount expent are reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance Disability insurance	lowed under the IRS expers These are additional de Note: Do not include are y insurance, and health sace, and health savings according to the sace.	orm 1220 nse allow eduction ny exper ivings a unts that	wances. s allowed by the see allowances ccount experiment are reasonab 663.00 0.00	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurancy dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	orted on line 5 of Official Followed under the IRS expersions. These are additional de Note: Do not include any insurance, and health sace, and health savings according to the Note: Do not include and the note of the Note: Do not include any insurance, and health savings according to the Note: Do not include any insurance, and health savings according to the Note: Do not include any insurance in the Note:	eductions avings a unts that	wances. s allowed by the sea allowances ccount expension are reasonabed 663.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, o	\$	8,474.52
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurancy our dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	orted on line 5 of Official Followed under the IRS expersions. These are additional de Note: Do not include any insurance, and health sace, and health savings according to the Note: Do not include and the note of the Note: Do not include any insurance, and health savings according to the Note: Do not include any insurance, and health savings according to the Note: Do not include any insurance in the Note:	eductions avings a unts that	wances. s allowed by the sea allowances ccount expension are reasonabed 663.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, o	\$	8,474.52
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurancy dependents. Health insurance Disability insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason	borted on line 5 of Official Followed under the IRS expersor and IRS exper	eductions by experiments that the state of t	wances. s allowed by the seallowances allowances. ccount expent are reasonabed 663.00 0.00 0.00 663.00 members. The port of an elder ole to pay for seallowances.	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, of the country o	\$	8,474.52
25. 26.	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions: Health insurance, disability insurance, disability insurance, disability insurancy dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason your household or member a include contributions to an are protection against family or second in the same and the same and the same are saven against family or saven and the same are saven against family or saven and saven against family or saven and saven and saven against family or saven and saven against family or saven against family	to the care of household or onable and necessary care a for your immediate family who count of a qualified ABLE priolence. The reasonably necessary care a priolence.	eductionary experience allowed with the state of the stat	wances. s allowed by the see allowances ccount expent are reasonab 663.00 0.00 0.00 663.00 members. The port of an elder pole to pay for see 26 U.S.C. § 5 monthly expentions.	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health only necessary for yourself, your spouse, of the country o	\$s	663.00

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ebtor 1	Joseph W. Heister		ise number (<i>if known</i>)			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operating ex	penses on		
	If you believe that you have home energy on 8, then fill in the excess amount of home er	osts that are more than the home energy costergy costs	sts included in exp	enses on lin	е	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must iry.	show that the addi	tional	\$_	0.0
		Iren who are younger than 18. The monthly pendent children who are younger than 18 y				
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why the ar	nount		
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or a	fter the date of adj	ustment.	\$_	481.2
		he monthly amount by which your actual foo allowances in the IRS National Standards. ⁻ s in the IRS National Standards.				
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's offic		te		
	You must show that the additional amount	claimed is reasonable and necessary.			\$_	0.0
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute inization. 11 U.S.C. § 548(d)(3) and (4).	n the form of cash	or financial		
	Do not include any amount more than 15%	of your gross monthly income.			\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.			\$	1,144.26
Dedu	uctions for Debt Payment					
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages, vehic	cle		
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually donkruptcy. Then divide by 60.	ue to each secured			
	Mortgages on your home				Averag	ge monthly ent
33a.	Copy line 9b here			=>	\$	2,434.00
	Loans on your first two vehicles					
33b.	Copy line 13b here			=>	\$	0.00
33c.	0 " 10 "			=>	\$	0.00
33d.	List other secured debts:					
	e of each creditor for other secured debt	Identify property that secures the debt	includ	payment de taxes urance?		
				No		
	-NONE-			Yes	\$	
					Ψ	
				No		
				Yes	\$	
				No		
			_	Yes +	\$	
			,	Сору	, _	
33e	Total average monthly payment. Add lines	33a through 33d	\$ 2,434	total		2,434.00

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ebtor 1	Jose	ph M. Heister			Cas	e numb	oer (if known)			
		debts that you listed in li property necessary for y				,				
= 1	No.	Go to line 35.								
	Yes.		u must pay to a creditor, i cossession of your propert in the information below.							
Name o	of the	creditor	Identify property that s	ecures the deb	ot	Tota	cure amount		nthly c	ure
-NON	E-				\$			÷ 60 = \$		
								Сору		
					Total	\$	0.00	total here=>	\$	0.00
		owe any priority claims -				nat				
are	•	due as of the filing date Go to line 36.	or your bankruptcy case	17 11 U.S.C. §	507.					
_		Fill in the total amount of	all of those priority claims	Do not inclu	do current or					
_	163.		uch as those you listed in		de current or					
		Total amount of all past	due priority claims			\$	43,575.87	÷ 60	\$	726.26
36. Proj	jecte	d monthly Chapter 13 pla				\$	200.00	•		
Office the E To fir	ce of Execund a li	nultiplier for your district as the United States Courts (utive Office for United Stat st of district multipliers that in enstructions for this form. This	for districts in Alabama an es Trustees (for all other o cludes your district, go online	nd North Carol districts). using the link sp	ina) or by	x	6.40			
Aver	rage	monthly administrative exp	pense			\$	12.80	Copy total here=> \$		12.80
		of the deductions for de s 33e through 36.	bt payment.					3	<u> </u>	3,173.06
Total De	educ	tions from Income								
38. Add	all c	of the allowed deduction	S.							
		ne 24, All of the expenses e allowances	allowed under IRS	\$	8,474.52	<u>2</u>				
Co	py lin	e 32, All of the additional	expense deductions	\$	1,144.26	<u> </u>				
Co	py lin	ne 37, All of the deductions	for debt payment	+\$	3,173.06	<u> </u>				
Tot	tal da	eductions		\$	12.791.84	.	Copy total here=>	. •		12.791.84

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ebtor 1	Joseph M. Heister				Case	ase number (if known)					
Part 2:	Determi	ne You	r Disposable Income Under 11	U.S.C. § 1325	5(b))(2)					
			ent monthly income from line current Monthly Income and Ca						\$_	16,153.62	
chi disa rec	ildren. The ability paymerived in acc	monthl ents fo cordance	ly necessary income you receive y average of any child support pair a dependent child, reported in few with applicable nonbankruptcy anded for such child.	are payments, or 2C-1, that you	Ç	s0	.00				
em in 1	neld fro 541(b)	etirement deductions. The mont m wages as contributions for qua (7) plus all required repayments or § 362(b)(19).	plans, as specified	Ş	s0	.00					
42. Tot	tal of all de	ductio	ns allowed under 11 U.S.C. § 70	07(b)(2)(A). C	opy	y line 38 here=>	• (12,791	.84		
exp the	penses and Fir expenses	you ha . You r	al circumstances. If special circuve no reasonable alternative, des nust give your case trustee a det ocumentation for the expenses.	scribe the spe	cia	I circumstances and	b				
Descri	be the spe	cial cir	cumstances			Amount of expe	nse				
,					_	\$		_			
					_	\$		_			
						\$		_			
				Total	\$_	0.00		opy ere=> \$		0.00	
44. To t	tal adjustm	ents. /	Add lines 40 through 43.			=>	S	12,791.84	Cop	y ==> -\$12,791.84	
	1		thly disposable income under §	§ 1325(b)(2). §	Sub	otract line 44 from lii	ne (39.		\$ 3,361.78	
hav tim you	ange in inc ve changed e your case u filed your p	ome o or are will be	r expenses. If the income in Forvirtually certain to change after the open, fill in the information below, check 122C-1 in the first column when the increase occurred, an	ne date you file w. For example n, enter line 2	ed : e, it in t	your bankruptcy per f the wages reported the second column,	titio d in	n and during the creased after			
Form	Line		Reason for change			Date of change		Increase or decrease?	Am	nount of change	
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$		
☐ 1220 ☐ 1220								☐ Increase ☐ Decrease	\$		
– 1220							_	- Decitase	Ψ		

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Debtor 1	Joseph M. Heister	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inf	formation on this statement and in any attachments is true and correct.
-	/s/ Joseph M. Heister Joseph M. Heister Signature of Debtor 1	
	February 8, 2019 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Accounts Case 3:19abl-30370 ago of 1 Filed b2/08/19an Entered 02/08/19 16:06:47wides Waht Inc.
910 West Van Buren Street P. Dockment 02 Flage 60 of 60 P.O. Box 14581
Suite 100-245 Salt Lake City, UT 84130-028 Des Moines, IA 50306-358

Chicago, IL 60607

Air Authority Heating & Air CCapitadnOng Bank USA Private National Mortgag 654 Reading Road P.O. Box 30281 P.O. Box 514387 Mason, OH 45040 Salt Lake City, UT 84130 Los Angeles, CA 90051

American Express P.O. Box 981537 El Paso, TX 79998 Controlled Credit Corp. P.O. Box 5154 Cincinnati, OH 45205-0154

Shane Ensor c/o Don Walsh, Esq/ Greg ${\bf E}$ 7 St. Paul Street, 18th F Baltimore, MD 21202

American Express Discover Financial Services Toyota Motor Credit Corp P.O. Box 650448 P.O. Box 15316 5005 N. River Blvd. NE Dallas, TX 75265-0448 Wilmington, DE 19850-5316 Cedar Rapids, IA 52411-6

Stenger Law 2618 East Paris Grand Rapids, MI 49546

Anthony Huspaska, Esq. First Source Advantage 205 Bryant Woods South Buffalo, NY 14228

Unique Law Care P.O. Box 62897 Cincinnati, OH 45262

Aptive Environmental GC Services
4710 Interstate Drive P.O. Box 46960
Cincinnati, OH 45246 Saint Louis, MO 63146

Universal One Credit Uni P.O. Box 467 Dayton, OH 45409

Avant 222 N. Lasalle Street Ste 1700 Chicago, IL 60601

Inland Residential Real Estate 2901 Butterfield Road Oak Brook, IL 60523

Internal Revenue Service c/o Resurgent Capital Service P.O. Box 7346 P.O. Box 1269 Philadelphia, PA 19101 Greenville, SC 29603

CACH, LLC 55 Beattie Place, Suite 110 71 Stevenson St. Greenville, SC 29601

Lending Club Suite 300 San Francisco, CA 94105

CACH, LLC c/o Stenger & Stenger Co. 2618 East Paris Ave. SE Grand Rapids, MI 49546

Mariner Finance 8211 Towne Center Dr. Nottingham, MD 21236